

## **Tilburg University**

### Better data, better policy and better lives

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## ADDICTION editorial

# Better data, better policy and better lives: a call for improved drug monitoring and concerted responses

With the breadth of new psychoactive substances and international policy changes, an analysis of specific responses in all areas of drug supply and demand is beyond the resources of a single country. The Scientific Committee of the European Monitoring Centre for Drugs and Drug Addiction calls for a strengthening of global monitoring and evidence synthesis and a renewed vigour in collaborative efforts to expand training, research and the quality and comparability of data across Europe and beyond.

The current European Union (EU) Drug Strategy and the Action Plan on Drugs will come to an end in 2020. This follows a successful period of 25 years of international monitoring and 20 years of risk assessment of New Psychoactive Substances by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) on behalf of the EU. Currently however, there remain many research questions of pressing policy and clinical practice relevance that cannot be addressed adequately by any one single country or indeed continent, due to low-quality, or lack of, data. The need for timely information to monitor and analyse the changing situation, and to assist policymakers and practitioners to adequately meet the new challenges is greater than ever. This is particularly pertinent in light of rapidly developing new psychoactive substances (NPS) and policy changes that have been introduced in many areas such as drug liberalization policies or the introduction of national prevention programmes. Across the globe, the debates on drug policy and practice are raging and within the past 5 years alone we have seen major changes.

All-embracing data collection, data analyses, long-term international policy impacts and specific responses in all relevant areas of drug supply and demand would be beyond the resources of any single country and, without coordinated action, might involve risks of confusion and 'friendly fire' between differing drug policy systems. Therefore, this editorial makes the case for the strengthening of the coordination, dissemination and implementation of, evidencebased, comprehensive drug monitoring and responses to meet the global challenges.

The drug situation as we have known it is rapidly changing. Hundreds of new psychoactive substances (NPS) have entered the drug market in the last decade. Some of these, in particular novel fentanyl and synthetic cannabinoids, are associated with severe patterns of acute toxicity resulting in significant morbidity and mortality. Routes of administration of drugs and the range of drug products have also changed in recent years and these can differ across countries [1,2]. There is concern over the availability of fentanyl in delivery devices not traditionally associated with illicit opioids such as eye drops and nasal sprays. The drug market is also no longer limited to dealing in dark back streets or alleyways. Drug sellers and buyers can meet in international virtual markets, be it on open websites, on the Dark net or via social media platforms or on the numerous drug user forums on the internet [3].

Understanding and assessing changes in the drug phenomenon and in policy responses requires a common effort, coordinated action and knowledge that no one state can achieve alone. The global security and health threats related to drugs call for continued and strengthened international cross-disciplinary scientific input into policy and planning. Researchers and politicians are frequently faced with challenging questions ranging from the need for health-led responses to personal cannabis use to city dwellers' concerns about safe injecting facilities to threats posed to the wider society from organized crime [4]. Practitioners are wrestling with their training on current best practice, queries are arising on the safe use of medicinal cannabis to the prescribing of take-home naloxone and no one country will have the data, the capacity or the resources to address these varied challenges [5,6].

For almost 25 years, the EMCDDA has accumulated unique knowledge and data collection systems. Other countries and continents may learn from the EMCDDA experience and the EU may learn from theirs. International experiences from other continents range from the Drug Abuse Warning Network (DAWN), a nation-wide public health surveillance system within emergency departments in the United States, to the annual Illicit Drug Reporting System (IDRS) among people who inject drugs and the Ecstasy and Related Drugs Reporting System (EDRS) identifying emerging trends across the cities of Australia.

To conclude, the Scientific Committee of the EMCDDA calls, in a time of changing drug policies and landscapes, for a strengthening of global monitoring and evidence synthesis. We call for greater collaboration and coordination in training and research. We highly recommend a renewed vigour in efforts to expand the analysis and the quality and comparability of data on the social and public health implications of drug use and drug policy across Europe and beyond. Specifically, we call for the following:

 To develop data availability, quality and international comparability further traditional data sources such as population surveys, outcome monitoring and register data should be given greater priority and common protocols developed or renewed to ensure they remain fit for purpose.

- In addition, common protocols for more recent data sources such as wastewater and syringe residual analysis, saliva tests and emergency room registrations should be improved, expanded across countries and employed in analyses,
- Improvements in international, comparable ethnographic and other qualitative studies are also required.
- Opportunities arising from social media monitoring and "big data" in the drug field need to be harnessed.
- We also need to invest more resources in assessing the various harms resulting from drug use and international trafficking and establishing the causes of such harms which can be inadvertently generated by varying policies and interventions.
- It is also important to thoroughly evaluate the effectiveness of supply-related policy interventions as it is nowadays performed routinely for many demand-related interventions, as the former still account for the majority of drug policy expenditure.
- Better research funding and international training of young researchers will also contribute to better analyses and use of data and scarce resources across countries.
- Finally, an improvement in the dissemination and implementation of international research evidence in the formation of policy and best practice is essential.

#### **Declaration of interests**

None.

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